

MATERIALS LICENSE  
SUPPLEMENTARY SHEET

License Number

34-25988-01

Docket or Reference Number

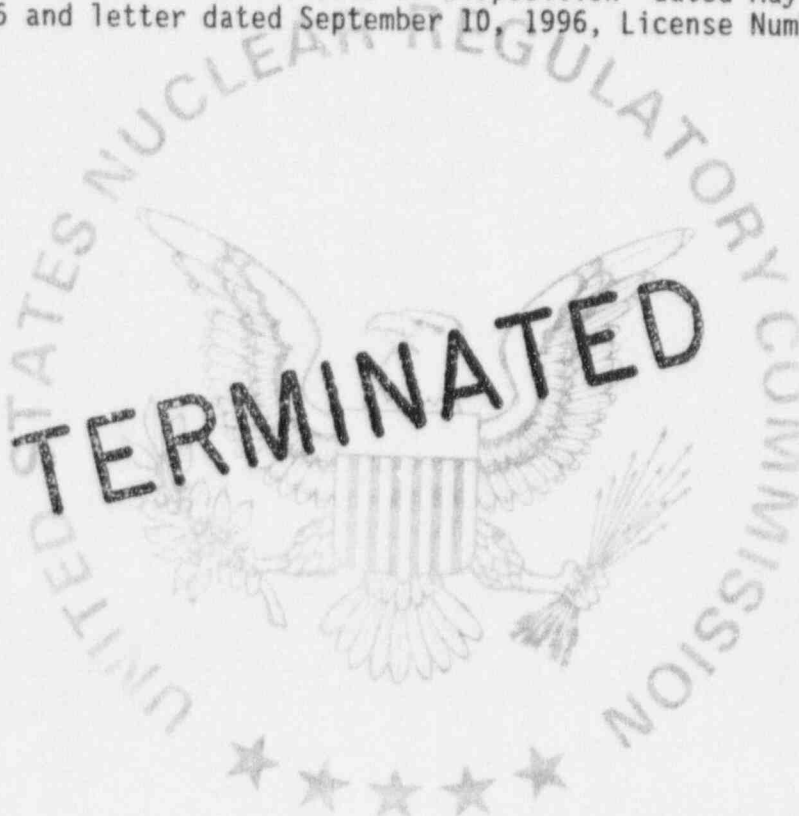
030-30874

Amendment No 04

301378

SmithKline Beecham  
Clinical Laboratories  
6180 Halle Drive  
Valley View, OH 44125

In accordance with NRC Form 314 "Certificate of Disposition" dated May 28, 1996, letter received May 31, 1996 and letter dated September 10, 1996, License Number 34-25988-01 is hereby terminated.



FOR THE U.S. NUCLEAR REGULATORY COMMISSION

Date

September 20, 1996

By

Colleen C. Casey

Nuclear Materials Licensing Branch, Region III

9610070042 960920  
PDR ADOCK 03030874  
C PDR

COPY

230  
50

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM  
AND  
REGIONAL LICENSING SECTIONS

(FOR LFMS USE)  
INFORMATION FROM LTS

PROGRAM CODE: 02410  
STATUS CODE: 0  
FEE CATEGORY: 3P  
EXP. DATE: 20040228  
FEE COMMENTS:  
DECOM FIN ASSUR REQD: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED  
APPLICANT/LICENSEE: SMITHKLINE BEECHAM CLINICAL LAB.  
RECEIVED DATE: 960531  
DOCKET NO: 3030874  
CONTROL NO.: 301378  
LICENSE NO.: 34-25988-01  
ACTION TYPE: TERMINATION

56

2. FEE ATTACHED

AMOUNT:  
CHECK NO.: 0

3. COMMENTS

SIGNED  
DATE 6/7/96

B. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE 03 IS ENTERED / /)

1. FEE CATEGORY AND AMOUNT: 3P FEE EXEMPT

2. CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR:  
AMENDMENT  
RENEWAL  
LICENSE

3. OTHER

SIGNED  
DATE SC 6/12/96

RECEIVED

JUN 14 1996

REGION III

RECEIVED BY LFDCB	
Date	June 7, 1996
Log	June 3, III
By	SC
Date Completed	6/12/96

(6-95)

10 CFR 30.36(c)(1)(iv)

10 CFR 40.42(c)(1)(iv)

10 CFR 70.38(c)(1)(iv)

## CERTIFICATE OF DISPOSITION OF MATERIALS

INSTRUCTIONS: ALL ITEMS MUST BE COMPLETED -- PRINT OR TYPE  
SEND THE COMPLETED CERTIFICATE TO THE NRC OFFICE SPECIFIED ON THE REVERSE

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS MANDATORY INFORMATION COLLECTION REQUEST: 30 MINUTES. THIS SUBMITTAL IS USED BY NRC AS PART OF THE BASIS FOR ITS DETERMINATION THAT THE FACILITY HAS BEEN CLEARED OF RADIOACTIVE MATERIAL BEFORE THE FACILITY IS RELEASED FOR UNRESTRICTED USE. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE INFORMATION AND RECORDS MANAGEMENT BRANCH (T-6 F33), U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555-0001, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0028), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503. AN AGENCY MAY NOT CONDUCT OR SPONSOR, AND A PERSON IS NOT REQUIRED TO RESPOND TO, A COLLECTION OF INFORMATION UNLESS IT DISPLAYS A CURRENTLY VALID OMB CONTROL NUMBER.

LICENSEE NAME AND ADDRESS

SMITHKLINE BEECHAM CLINICAL LABORATORIES  
6180 Halle Drive  
Valley View, Ohio 44125

LICENSE NUMBER

34-25988-01

LICENSE EXPIRATION DATE

February 28, 1999

## A. MATERIALS DATA (Check one and complete as necessary)

THE LICENSEE OR ANY INDIVIDUAL EXECUTING THIS CERTIFICATE ON BEHALF OF THE LICENSEE CERTIFIES THAT:  
(Check and/or complete the appropriate item(s) below.)

- ☐ 1. NO MATERIALS HAVE EVER BEEN PROCURED OR POSSESSED BY THE LICENSEE UNDER THIS LICENSE.  
OR  
☒ 2. ALL ACTIVITIES AUTHORIZED BY THE LICENSE HAVE CEASED AND ALL MATERIALS PROCURED AND/OR POSSESSED BY THE LICENSE NUMBER CITED ABOVE HAVE BEEN DISPOSED OF IN THE FOLLOWING MANNER. (If additional space is needed, use the reverse side or provide attachments.)

Describe specific material transfer actions and, if there were radioactive wastes generated in terminating this license, the disposal actions including the disposition of low-level radioactive waste, mixed waste, Greater-than-Class-C waste, and sealed sources, if applicable.

For transfers, specify the date of the transfer, the name of the license recipient, and the recipient's NRC license number or Agreement State name and license number.

If materials were disposed of directly by the licensee rather than transferred to another licensee, licensed disposal site or waste contractor, describe the specific disposal procedures (e.g., decay in storage).

Kept on site for 10 half-lives and disposed of as biohazard material.  
Waste was transferred to BFI on 4/5/96 (see manifest)

## B. OTHER DATA

- ☒ 1. OUR LICENSE HAS NOT YET EXPIRED; PLEASE TERMINATE IT.
2. A RADIATION SURVEY WAS CONDUCTED BY THE LICENSEE TO CONFIRM THE ABSENCE OF LICENSED RADIOACTIVE MATERIALS AND TO DETERMINE WHETHER ANY CONTAMINATION REMAINS ON THE PREMISES COVERED BY THE LICENSE. (Check one)
- ☐ NO (Attach explanation)
- ☒ YES, THE RESULTS (Check one)
- ☒ ARE ATTACHED, or
- ☐ WERE FORWARDED TO NRC ON (Date)

3. THE PERSON TO BE CONTACTED  
REGARDING THE INFORMATION  
PROVIDED ON THIS FORM

NAME

Brian Shrimpton

TELEPHONE NUMBER

(Include Area Code)

216-328-7500

Ext. 7538

4. MAIL ALL FUTURE CORRESPONDENCE REGARDING THIS LICENSE TO

Brian Shrimpton  
6180 Halle Drive  
Valley View, Ohio 44125

SmithKline Beecham Clinical Lab.

CERTIFYING OFFICIAL

MAY 31 1996

MAY 31 1996

I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

PRINTED NAME AND TITLE

Brian Shrimpton  
Technical Supervisor

SIGNATURE

Brian Shrimpton

REGION III DATE

5/28/96

WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTIONS.

301378

FILE CERTIFICATES AS FOLLOWS:

IF YOU ARE A DISTRIBUTOR OF EXEMPT PRODUCTS, SEND TO:

DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY  
OFFICE OF NUCLEAR MATERIAL SAFETY AND SAFEGUARDS  
U.S. NUCLEAR REGULATORY COMMISSION  
WASHINGTON, DC 20555-0001

ALL OTHERS, IF YOU ARE LOCATED IN:

CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE,  
MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW  
JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR  
VERMONT, SEND APPLICATIONS TO:

LICENSING ASSISTANCE SECTION  
NUCLEAR MATERIALS SAFETY BRANCH  
U.S. NUCLEAR REGULATORY COMMISSION, REGION I  
475 ALLENDALE ROAD  
KING OF PRUSSIA, PA 19406-1415

ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI,  
NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA,  
TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA,  
SEND APPLICATIONS TO:

NUCLEAR MATERIALS SAFETY SECTION  
U.S. NUCLEAR REGULATORY COMMISSION, REGION II  
101 MARIETTA STREET NW, SUITE 2900  
ATLANTA, GA 30323-0189

IF YOU ARE LOCATED IN:

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI,  
OHIO, OR WISCONSIN, SEND APPLICATIONS TO:

MATERIALS LICENSING SECTION  
U.S. NUCLEAR REGULATORY COMMISSION, REGION III  
801 WARRENVILLE ROAD  
LISLE, IL 60532-4351

ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO,  
HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA,  
NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA,  
OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA,  
TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND  
APPLICATIONS TO:

MATERIAL RADIATION PROTECTION SECTION  
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV  
611 RYAN PLAZA DRIVE, SUITE 400  
ARLINGTON, TX 76011-8064

RECEIVED  
MAY 3 1989  
REGION II



**SB**  
**SmithKline Beecham**  
*Clinical Laboratories*

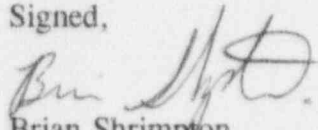
Materials Licensing Section  
U.S. Nuclear Regulatory Commission, Region III  
801 Warrenville Road  
Lisle, IL 60532-4351

Dear Sir,

Enclosed please find our completed NRC form 314. Also documentation for the release of the decayed radioactive waste as biohazard waste. There is a wipe test for the different areas of the laboratory that would have been exposed to radioactive material as well as a statement that the hand held meter reads background on all surfaces.. The isotope used was  $I^{125}$  which has not been brought on site for almost 2 years or more than 10 half-lives.

Please terminate the licence at this time.

Signed,



Brian Shrimpton  
Technical Supervisor  
Ext 7538

MAY 31 1996

MAY 30 1996

MANIFEST N° 130922

EMERGENCY TELEPHONE NUMBER 1-800-234-0051

CERTIFICATE NO.

24 HOUR NUMBER 1-216-393-0385

PHONE

**Generator Certification:** This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. *Decayed 11/28/88*

*Signature*

4-5-86  
Date

BFI Medical Waste Systems

1901 Pine Avenue S.E. Warren, Ohio 44488

216-393-0385

Registration Certificate No. 78-T-0048 PA-HC Q093

Vehicle Decal #

#### Acknowledgement of Receipt of Materials

Print/Type Name GAIL SIMMS Date 4-5-96

Signature [Signature]

## TRANSPORTER 2

Phone

Registration Certificate No.

Vehicle Decal #

### Acknowledgement of Receipt of Materials

Print/Type Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

GENERATOR DESIGNATED INFECTIOUS WASTE  
TREATMENT FACILITY

BF1 Medical Waste Systems

1901 Pine Ave. S.E.

Warren, Ohio 44483

Phone 216-393-0385

## ALTERNATE FACILITY:

**BFI Sheridan Medical Waste**

3472 Progress Drive

Dunkirk, NY 14048

Phone 716-366-4444

INFECTIONOUS WASTE TREATMENT FACILITY  
ACKNOWLEDGEMENT OF RECEIPT OF MATERIALS

BFI Medical Waste Systems 216-393-0385

1901 Pine Avenue S.E. Warren, Ohio 44483

Signature Dwain M. [illegible] Date 4-5-90

Discrepancy Indication

**Treatment Certification:** This is to certify that the infectious wastes described above were treated in accordance with paragraph (A) of rule 3745-27-32 of the Ohio Administrative Code.

rule 3745-27-32 of the Ohio Administrative Code.

SUSAN DANK Dusan Dank 4-5-96  
Print/Type Name Signature Date

WHITE- GENERATOR • YELLOW- TREATMENT FACILITY • PINK- TRANSPORTER • GOLD- GENERATOR

Revised 12/93

DATE: APR 11 96  
USER ID: SA

BACKGROUND CHECK

TIME: 12:34 AM  
COUNT TIME: 10.00 MIN

LOWER LEVEL KEV: 15  
AVERAGE CPM: 21

ISOTOPE: 125-I  
UPPER LEVEL KEV: 80  
HI/LO CPM RATIO: 2.500

WELL NUMBER 1	25	21	15	21	17
WELL NUMBER 6	19	15	23	15	25
WELL NUMBER 11	19	17	21	15	21
WELL NUMBER 16	23	21	23	40	19
WELL NUMBER 21	21	21	27	15	17
AVERAGE CPM	21 HI/LO CPM RATIO 2.500				

EDIT LUT ID: NO  
SOURCE OF DATA: COUNT TRAY  
DESTINATION OF RESULTS: PRINTER

USE STORED CURVE: NO  
USE TEMPLATE: NO  
TERMINATE ON QC CRASH: NO  
FIRST CURVE:  
AUTO REPLACE OUTLIERS: NO  
PLOT L-7 QC CHARTS: NO  
SECOND CURVE:  
UPDATE TEMPLATE: NO  
UPDATE QC LOG: NO

FIRST PROTOCOL ID: CPM 125-I ISOTOPE: 125-I

PROTOCOL EDITED BY: LTI  
ON: MAY 01 90 UNITS:

TUBE REPLICATIONS DOSE  
UNK 1  
TUBE LOADING ORDER  
TEMPLATE RESPONSE LOWER LIMIT UPPER LIMIT NAME

RESPONSE VARIABLE IS CPM

TUBE TYPE	TUBE #	TRAY POS	CPM	KEV	RESPONSE	AUG RESPONSE	DOSE	AUG RESULTS	COMMENTS
UN0001	1	101#1	2		1.91551			1.91551	
UN0002	2	102#2	0		0.00			0.00	
UN0003	3	103#3	2		1.95942			1.95942	
UN0004	4	104#4	5		4.85271			4.85271	
UN0005	5	105#5	0		0.00			0.00	

All areas checked with wipe test were at background

Sam ShyD  
1/29/96

Portable meter shows only background activity.

SEP 24 1996

Brian Shrimpton  
Technical Supervisor  
SmithKline Beecham  
Clinical Laboratories  
6180 Halle Drive  
Valley View, OH 44125

Dear Mr. Shrimpton:

Enclosed is Amendment No. 04 which terminates your NRC License No. 34-25988-01 in accordance with your request.

If you have any questions or require clarification on any of the information stated above, you may contact us at (630) 829-9887.

Sincerely,

Original Signed By  
Colleen C. Casey  
Nuclear Materials Licensing Branch

License No. 34-25988-01  
Docket No. 030-30874

Enclosure: Amendment No. 04

DOCUMENT NAME: M:\03030874.T6

To receive a copy of this document, indicate in the box: "C" = Copy without attachment/enclosure "E" = Copy with attachment/enclosure "N" = No copy

OFFICE	DNMS/RIII <i>CC</i>							
NAME	CCCasey:brt							
DATE	09/26/96							

OFFICIAL RECORD COPY

301378



**SB**  
**SmithKline Beecham**  
*Clinical Laboratories*

September 10, 1996

United States Nuclear Regulatory Commission  
Region III  
Attn. Colleen Casey  
Control # 301378  
801 Warrenville Road  
Lisle, Illinois 60532-4351

Dear Ms. Casey,

Here is the additional information based on our conversation on August 8, 1996. Enclosed is copies of our disposal manifests (other than the one already sent), diagram of the facility showing the sites that were wiped tested and dosimeter.

Calibration certificate for the Dosimeter Model 3007 serial number 104215.

Gamma Counter Quality control log showing efficiencies for the time of the testing of the wipe tests.

Enclosed is the summary of the waste disposal to the sewers.

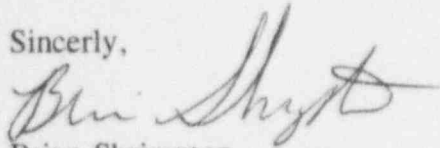
There has not been any radioactive spills.

There was no public exposure to the public because the RIA section is a restricted area.

There has never been any on-site burials of any radioactive material.

Please contact me at 1-800-854-1774 ext. 7538 if you have any questions.

Sincerely,



Brian Shrimpton  
Technical Supervisor

**RECEIVED**  
**SEP 16 1996**  
**REGION III**

# GAMMA COUNTER QUALITY CONTROL LOG

LABORATORY TECHNOLOGIES, INC. 125I  
 MULTI-CALIBRATORS MULTILOG LOT:19602PB  
 COUNT FOR 0.8 MINUTES

EXPIRES: 18 AUG 96

	MON	TUE	WED	THU	FRI	SAT	SUN
DATE DPM	1APR96 204074	2APR96 201709	3APR96 199372	4APR96 197061	5APR96 194777	6APR96 192520	7APR96 190288
ENTER HI CAL CPM & WELL #							
ENTER LO CAL CPM & WELL #							
CALC HI-LO DIFF							
CALC % DIFF (DIFF/LO CAL)							
CALC % EFF (LO/DPM*100)	74.134%	74.389%	74.473%	74.060%	74.007%		
ENTER HI BG CPM & WELL #							
ENTER LO BG CPM & WELL #							
CALC HI/LO BG RATIO	2.5	2.4	1.7	2.5	2.0		
	MON	TUE	WED	THU	FRI	SAT	SUN
DATE DPM	8APR96 188083	9APR96 185903	10APR96 183749	11APR96 181619	12APR96 179514	13APR96 177434	14APR96 175377
ENTER HI CAL CPM & WELL #							
ENTER LO CAL CPM & WELL #							
CALC HI-LO DIFF							
CALC % DIFF (DIFF/LO CAL)							
CALC % EFF (LO/DPM*100)	73.345%	74.237%	73.398%	73.584%	73.598%		
ENTER HI BG CPM & WELL #							
ENTER LO BG CPM & WELL #							
CALC HI/LO BG RATIO	2.4	2.5	2.0	2.0	1.9		

Wipe Test performed on  
Specimens from Cleveland Lab  
on April 13, 1996. Using the  
ICN (150-Data) Series 500  
gamma Counter.

Efficiencies are performed daily.  
(Mon-Fri). Please see attached  
Summary.

Sincerely

Sam Allen

Supervisor

SBCL - Detroit

215 INDACOM DRIVE • ST. PETERS, MISSOURI 63376  
(314) 928-9628 • FAX 928-9857

CONTACT NAME	Brian Shrimpton	INSTRUMENT MAKE	Dosimeter
CLIENT NAME	Smith Kline Beecham	INSTRUMENT MODEL	3007
FACILITY ADDRESS	Clinical Laboratories	SERIAL NO.	104215
	6180 Halle Dr.	DETECTOR TYPE	3011 end window
	Valley View, Oh. 44125	METER DISPLAY	0-300 cpm
TELEPHONE	216-328-7500	BATTERY CHECK	good

RANGE OR FULL  
SCALE DISPLAY

cpm	n/a	cpm	Range Multiplier
25,000		25,000	$\times 100$
10,000		10,000	$\times 100$
2,500		2,500	$\times 10$
1,000		1,000	$\times 10$
248		248	$\times 1$
98		98	$\times 1$

\*\* 2,500 cpm \*  $\frac{\text{mm}}{2997}$  1 ml/hr. @  $\times 10$ .

CALIBRATED BY: Bill Faulkner DATE: 11/27/95 CAL. DUE DATE: 11/27/96  
REVIEWED BY: K. E. [Signature] DATE: 11/27/95



# RADIOACTIVE DISPOSAL RELEASED TO THE SEWER SYSTEM

Calculated using 2,850,000,000 ml/year

Year/Month	1991- $\mu$ Ci	1992- $\mu$ Ci	1993- $\mu$ Ci	1994- $\mu$ Ci
January	2882.88	1929.34	1430.42	824.27
February	3227.46	1892.74	1343.25	867.26
March	1568.87	1989.95	1631.28	1080.11
April	1786.79	1885.93	1568.15	913.59
May	1959.86	1991.65	1281.53	997.42
June	1829.81	1726.49	1294.23	887.26
July	1843.85	1353.76	815.59	83.01
August	1888.34	1648.85	1335.19	
September	1832.64	1422.16	1077.96	
October	2089.96	1535.22	870.18	
November	1920.45	1373.27	840.15	
December	1749.65	1378.13	854.92	
Totals	24580.56	20127.49	14342.85	5652.92
Amount of water (ml)	2,850,000,000	2,850,000,000	2,850,000,000	1,662,500,000
$\mu$ Ci/ml	8.62e-06	7.06e-06	5.03e-06	3.40e-06
Max $\mu$ Ci allowed	4x10 <sup>-5</sup> /ml	4x10 <sup>-5</sup> /ml	4x10 <sup>-5</sup> /ml	4x10 <sup>-5</sup> /ml

100,000cu ft water per year

7.5 Gal=1 cu ft

100,000 cu ft = 750,000 Gal

750,000 gal = 2,850,000,000 ml

Data compiled from our Monthly calculations of "concentration of disposed wasted-drain" form. The form contains a error in the amount of water for the month was actually for one year. We were still below the limit after recalculating. Assuming the 237,500,000 ml of water per month, the maximum amount is 95,000  $\mu$ Ci per month. Each month is well below that amount. The highest amount disposed of in one month was 3227  $\mu$ Ci or 29 times lower then the limit.

## CONVERSATION RECORD

TIME DATE

4:15pm 8/8/96

☐ VISIT☐ CONFERENCE☒ TELEPHONE☒ INCOMING☐ OUTGOING

NAME OF PERSON(S) CONTACTED OR IN CONTACT

Brian Shrimpton

ORGANIZATION (OFFICE, DEPT. ETC.)

SmithKline Beecham

TELEPHONE NO.

216-328-7500

ext. 7538

SUBJECT

C/N 301378

L/N 34-25988-01

Additional Information  
Requested:

SUMMARY

~~Confirm whether each item applies or not.~~

When a licensee terminates licensed activities or licensed activities are transferred to another licensee, we require that certain records be transferred to the NRC or to a successor licensee to ensure their long-term availability. Please transfer the following records, as were applicable to your program, that pertain to:

- a. the decommissioning of your facility;
- b. radiation doses to the public; and
- c. waste disposal by release to sewers, incineration, radioactive material spills, and on-site burials.

Records may be transferred to the USNRC Region III, 801 Warrenville Road, Lisle, Illinois 60532-4351, or to the new licensee if licensed activities will continue at the same location under another NRC license.

No transfers or changes of ownership or license terminations will be authorized unless all records considered important to the safe and effective decommissioning of the facility contained in 10 CFR 30.35(g), 40.36(f), 70.25(g), and 72.30(d) and all records concerning public dose and waste disposal have been transferred to the person continuing the licensed activity, or to the NRC for license terminations.

ACTION REQUIRED

① Identity of instruments  
(Counters) efficiency & calibration dates

② Diagram of facility w/ surveyed areas, wiped areas keyed to it.

15 days to respond (+ or -) a week - Brian will be on vacation

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

Colleen Casey

8/8/96

ACTION TAKEN

OPTIONAL FORM 99 (7-90)

## FAX TRANSMITTAL

# of pages 1

SIGNATURE

BRIAN SHRIMPTON

From

COLLEEN CASEY

Dept. Agency  
SMITHKLINE BEECHAM LABS

Phone

630-824-9841

Fax #  
216-328-7539

Fax #

630-575-6078/1259

NSN 7540 01-317-7968

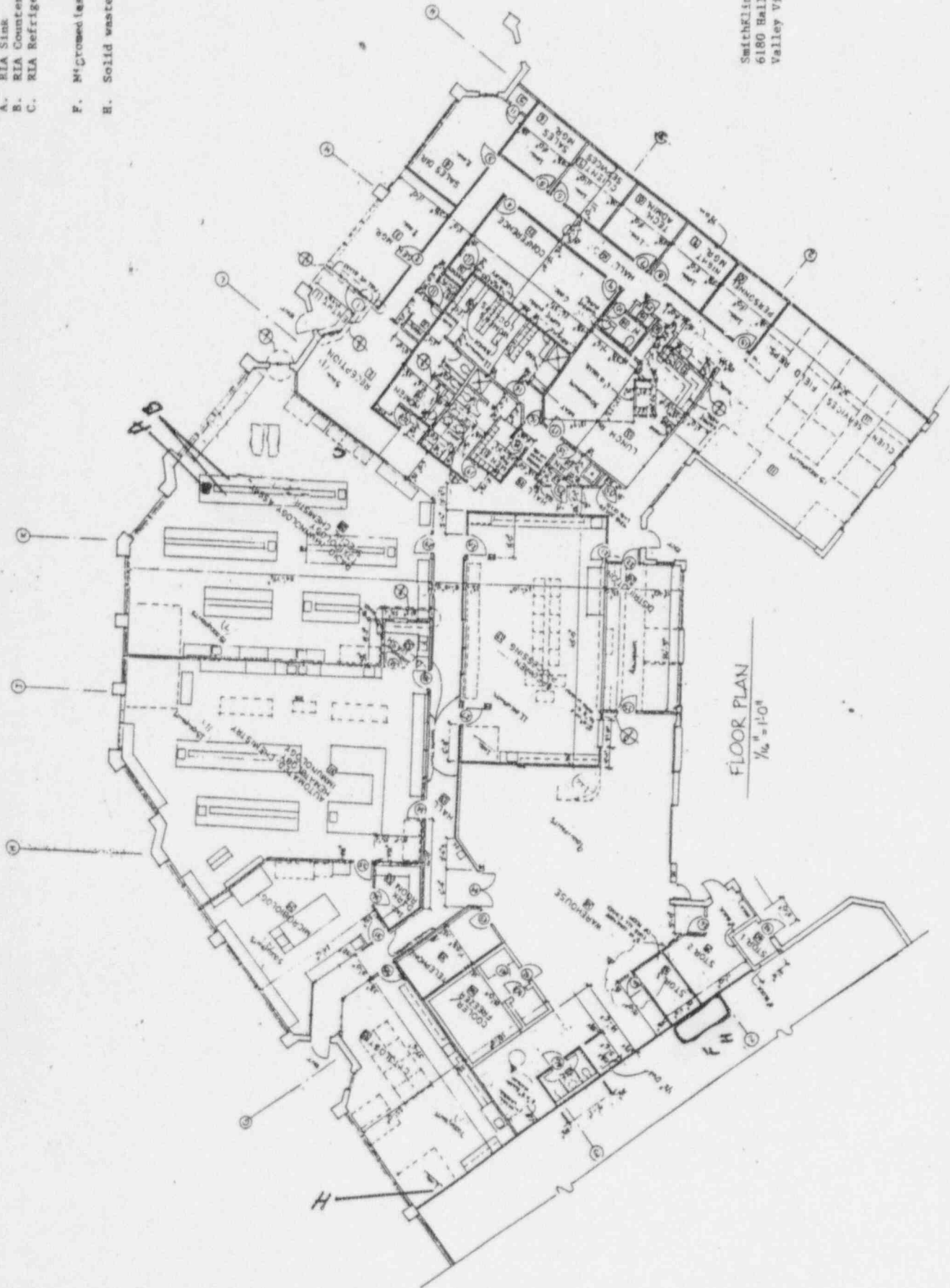
5099-101

GENERAL SERVICES ADMINISTRATION

- A. RIA Sink
- B. RIA Counter Top
- C. RIA Refrigerator

- F. MicroMedics Apex 500 gamma counter
- H. Solid waste storage area

SmithKline Beecham Clinical I  
6180 Halle Drive  
Valley View, Ohio 44125



GENERATOR NUMBER

REV. 4/88

## RADIOACTIVE WASTE SHIPMENT &amp;

USEcology Nuclear

USEcology  
an American

EXECUTIVE OFFICE: (502)

P.O. BOX 7246 • LOUISVILLE, KY 40202

(1) GENERATOR NAME

ADDRESS

CITY

STATE

ZIP

CONTACT

PHONE

USER PERMIT #

SHIPMENT #

(3) AGENT/BROKER

BROKER'S USECOLOGY #

ADDRESS

CITY

CONTACT

BROKER SHIPMENT #

BROKER

(2) BILL DISPOSAL CHARGES TO

NAME

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

Broker's Authorized Signature Acknowledging Waste Receipt

TOTAL FOR EACH CLASS		REPORTABLE QUANTITY NAME (if any)	PROPER SHIPPING NAME & HAZARD CLASS (PER 49 CFR 172.101)	ID NUMBER
# OF PACKAGES	WEIGHT (Pounds)			
			Radioactive Material, empty packages	UN2906
12	1800	—	Radioactive Material, fissile, n.o.s. — Radioactive Material	UN2918
			Radioactive Material, low specific activity, n.o.s. — Radioactive Material	UN2912
			Radioactive Material, n.o.s. — Radioactive Material	UN2982
			Radioactive Material, limited quantity, n.o.s. — Radioactive Material	UN2910
			Radioactive Material, special form, n.o.s. — Radioactive Material	UN2974
			Radioactive Material, instruments and articles — Radioactive Material	UN2911
			L. anyl Acetate (RQ-5000/2270) — Radioactive Material	NA9180

TERMS AND CONDITIONS

A. TITLE: Upon inspection and acceptance at the disposal site by USEcology and all appropriate regulatory authorities, title to the Waste which conforms to Company's

B. WASTE PRODUCTS: Customer represents and warrants that data set forth in this Radioactive Waste Shipment &amp; Disposal Manifest is true and correct in all respects

C. INDEMNIFICATION: Customer agrees to indemnify USEcology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from the waste not meeting the standards prescribed by the Department of Transportation or any other governmental agency having jurisdiction over such matters.

FOR USECOLOGY

TYPE OF CONTAINER	CONTAINER VOLUME CU. FT.	# OF PKGS.	CU. FT. PER CONTAINER TYPE
DRUMS			
OVERPACK			
55	7.50		
30	4.01		
5	0.67		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
CASK LINERS			
OTHER			
OTHER			
SHIPMENT TOTALS			

## LOAD EVALUATION

CHECK ALL THAT APPLY TO THIS LOAD. DESCRIBE INADEQUACIES IN COMMENT SECTION

- ☐ Manifest Waste Description Inadequate  
☐ Contamination or Leakage Detected  
☐ Unexpected Exposure Rates Detected  
☐ No Violations Detected on this Load
- ☐ Bracing Inadequate  
☐ Labels, Markings, etc. Inadequate  
☐ Container Integrity Inadequate  
☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN

12 X DMS

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED



# SPSAL MANIFEST

inc.  
Ecology company  
26-7160  
NTUCKY 40207

PAGE 1 OF 2

(4) CONSIGNED TO: US Ecology, Inc.

☐ P.O. BOX 636  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☐ P.O. BOX 578  
HWY 95, 12 m. -- So. of  
Beatty, NV 89003  
702-553-2203

☒ OTHER

CONTACT

ADDRESS

CITY

STATE

ZIP

PHONE

USE THIS NO. ON ALL  
CONTINUATION PAGES

120518

(5) CARRIER

CARRIER EPA # (if any)

ADDRESS

CITY

PHONE

CASK TYPE

SHIPPING DATE

STATE

ZIP

CASK SURFACE EXPOSURE RATE

mR/hr

(7)

SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

± VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NUCLEAR MATERIAL (grams)			
			U-233	U-235	PLUTONIUM	TOTAL
90.0	12	—	—	—	—	—
ACTIVITY						
ACTIVITY TOTALS:		TRITIUM	C-14	Tc-99	I-129	ALL ISOTOPES
<input type="checkbox"/> Curies		—	—	—	—	1900
<input checked="" type="checkbox"/> Millicuries		—	—	—	—	—
(10CFR20.311)		—	—	—	—	—

THIS IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

IONS

Authorized Signature

Title

Date

operations herein shall thereupon transfer from the Customer and be vested in US Ecology.

accordance with all applicable governmental laws, rules, regulations and the designated facility license.

in the failure of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to

IS USE ONLY

BURIAL DATA

CONTAINER  
RATON  
All that apply to this load:  
Bin Soil (SNM) 1.4F waste (SNM) 2  
between upright containers (Gases) 3  
soil (1% Chelates: Solidified Oils) 4  
No requirement 5

STATE MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURNED  
THIS MANIFEST

CATEGORY	HIGH RAY	CLASS A	CLASS B	CLASS C
DEPTH FEET				

Received

Disposed

h No

material meets licensed limits.

material was disposed of in accordance with license.

ORIZED INITIALS:

US ECOLOGY INVOICE #

US ECOLOGY CUSTOMER #

(Must agree with Agent named in Block 2)

US ECOLOGY INVOICE DATE

MO

DY

YR

DISCREPANCY CODE(S):

BATES # 9610070042 -01

CUSTOMER COPY

GENERATOR NUMBER 0HR 99-000-7411

GENERATOR NAME

ADDRESS

CITY

## CONTACT

USER PERMIT #

SHIPMENT #

BILL DISPOSAL CHARGES TO

NAME \_\_\_\_\_

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

[illegible]

## TERMS AND CON

A. TITLE: Upon inspection and acceptance at the disposal site by US Ecology and all appropriate regulatory authorities, title to the Waste which conforms to Company's re

**RADIOACTIVE WASTE PRODUCTS:** Customer represents and warrants that data set forth in this Radioactive Waste Shipment & Disposal Manifest is true and correct in all respects and

**INDemnIFICATION:** Customer agrees to indemnify US Ecology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from the performance of the work under this contract and if such loss or liability exceeds the limits of coverage provided by the policy of insurance required by the Department of Transportation or any other governmental agency having jurisdiction over such matters.

## FOR USECOLOG

TYPE OF CONTAINER	CONTAINER VOLUME CU. FT.	# OF PKGS.	CU. FT. PER CONTAINER TYPE
DRUMS			
OVERPACK			
55	7.50		
30	4.01		
5	0.67		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
CASK LINERS			
OTHER			
OTHER			
TOTALS			

### LOAD EVALUATION

CHECK ALL THAT APPLY TO THIS LOAD. DESCRIBE INADEQUACIES IN COMMENT SECTION.

- ☐ Manifest Waste Description Inadequate  
☐ Contamination or Leakage Detected  
☐ Unexpected Exposure Rates Detected  
☐ No Violations Detected on this Load
- ☐ Bracing Inadequate  
☐ Labels, Markings, etc. Inadequate  
☐ Container Integrity Inadequate  
☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN

7XDMS

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED

# DISPOSAL MANIFEST

Ecology company  
6-7160  
BUCKY 40207

PAGE 1 OF 2

(4) CONSIGNED TO: US Ecology, Inc.

☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☐ P.O. BOX 578  
HWY 95, 12 m. -- So. of  
Beatty, NV 89003  
702-553-2200

☒ OTHER

CONTACT

ADDRESS

CITY

STATE

ZIP

PHONE

(5) CARRIER

SHIPPING DATE

CARRIER EPA # (M/V)

ADDRESS

CITY

STATE

ZIP

PHONE

CASK TYPE

CASK SURFACE EXPOSURE RATE

mR/hr

ZIP

PHONE

PERMIT #

2/1/89

(7) SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kg)	SPECIAL NUCLEAR MATERIAL (grams)			
			233	U-235	PLUTONIUM	TOTAL
ACTIVITY						
ACTIVITY TOTALS:			TRITIUM	C-14	Tc-99	I-129
<input type="checkbox"/> Curies						
<input checked="" type="checkbox"/> Millicuries						
(10CFR20.311)						1.75

ANSTEC  
APERTURE  
CARD

Also Available on  
Aperture Card

US IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

Authorized Signature Title Date

ONS

entations herein shall thereupon transfer from the Customer and be vested in US Ecology.

accordance with all applicable governmental laws, rules, regulations and the designated facility license.

the failure of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to

USE ONLY

BURIAL DATA

AINER  
ATION  
that apply to this load:  
Bin Soil (SNM) 1 AFI waste (SNM) 2  
between upright containers (Gases) 3  
soil (1% Chelates, Solidified Oils) 4  
No requirement 5

TE MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURES  
THIS MANIFEST

CATEGORY	HIGH R/N	CLASS A	CLASS B	CLASS C
DEPTH FEET				

Received  
disposed  
No

material meets licensed limits  
material was disposed of in accordance with license.

ORIZED INITIALS

USECOLOGY INVOICE #

USECOLOGY CUSTOMER #

(Must agree with Agent named in Block 2)

USECOLOGY INVOICE DATE

MO

DY

YR

DISCREPANCY CODE(S):

BATES # 9610070042-02

CUSTOMER COPY



OH R-99-000-7411

Smith Rhine Lippman Labs  
5420 Commonwealth Park Rd.Ashwood  
M. M. L. L. L.

STATE OH

ZIP

PHONE

216-464-5830

PERMIT #

1456

SHIPMENT #

10/6/88

LL DISPOSAL CHARGES TO

Baker

NAME

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

REV 4/88  
RADIOACTIVE WASTE SHIPMENT &

USEcology Nuclear

USEcology  
an AmerEXECUTIVE OFFICE: (502)  
P.O. BOX 7246 • LOUISVILLE, KY

(3) AGENT/BROKER

BROKER'S USECOLOGY #

ADDRESS

CITY

CONTACT

BROKER SHIPMENT #

BROKER USE

Broker's Authorized Signature Acknowledging Waste Receipt

TOTAL FOR EACH CLASS		REPORTABLE QUANTITY NAME (if any)	PROPER SHIPPING NAME & HAZARD CLASS (PER 49 CFR 172.101)	ID NUMBER
# OF PACKAGES	WEIGHT (Pounds)			
7	1050		Radioactive Material, empty packages	UN2908
			Radioactive Material, fissile, n.o.s. — Radioactive Material	UN2918
			Radioactive Material, low specific activity, n.o.s. — Radioactive Material	UN2912
			Radioactive Material, n.o.s. — Radioactive Material	UN2982
			Radioactive Material, limited quantity, n.o.s. — Radioactive Material	UN2910
			Radioactive Material, special form, n.o.s. — Radioactive Material	UN2974
			Radioactive Material, instruments and articles — Radioactive Material	UN2911
			Uranyl Acetate (RQ-5000/2270) — Radioactive Material	NA9180

- A. TITLE: Upon inspection and acceptance at the disposal site by US Ecology and all appropriate regulatory authorities, title to the Waste which conforms to Company's requirements.
- B. WASTE PRODUCTS: Customer represents and warrants that waste set forth in this Radioactive Waste Shipment & Disposal Manifest is true and correct in all respects and
- C. INDEMNIFICATION: Customer agrees to indemnify US Ecology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from failure to meet the standards prescribed by the Department of Transportation or any other governmental agency having jurisdiction over such matters.

FOR USECOLOGY

TYPE OF CONTAINER	CONTAINER VOLUME CU. FT.	# OF PKGS	CU. FT. PER CONTAINER TYPE
RUMS			
OVERPACK			
55	7.50		
30	4.01		
5	0.67		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
ASK LINERS			
OTHER			
OTHER			
SHIPMENT TOTALS			

## LOAD EVALUATION

CHECK ALL THAT APPLY TO THIS LOAD DESCRIBE INADEQUACIES IN COMMENT SECTION

☐ Manifest Waste Description Inadequate☐ Contamination or Leakage Detected☐ Unexpected Exposure Rates Detected☐ No Violations Detected on this Load☐ Bracing Inadequate☐ Labels, Markings, etc. Inadequate☐ Container Integrity Inadequate☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN

7XDMS

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED

CO

SE

CO

CO

10

10

ON

R

P

W

I

I

Date

Date

Trans

Trans

Trans

Trans

Trans

Trans

Trans



# DISPOSAL MANIFEST

Inc.  
an Ecology company  
426-7160  
KENTUCKY 40207

PAGE 1 OF 2

(4) CONSIGNEE TO: US Ecology, inc.

☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☐ P.O. BOX 578  
HWY 95, 12 m. - So. of  
Beatty, NV 89003  
702-553-2233

USE THIS NO. ON ALL CONTINUATION PAGES **117287**

☒ OTHER

CONTACT

ADDRESS

CITY

STATE

ZIP

PHONE

(5) CARRIER

CARRIER EPA ID #

ADDRESS

CITY

PHONE

CASK TYPE

SHIPPING DATE

STATE

ZIP

CASK SURFACE EXPOSURE RATE

mR/hr

(7)

SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NUCLEAR MATERIAL (grams)				TOTAL
			U-233	U-235	PLUTONIUM		
52.5	7						

ACTIVITY

ACTIVITY TOTALS

☐ Curies  
☒ Millicuries

(10CFR20.311)

TRITIUM

C-14

Tc-99

I-129

ALL ISOTOPES

THIS IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

IONS

Authorized Signature

Title

Date

Representations herein shall thereupon transfer from the Customer and be vested in US Ecology.

in accordance with all applicable governmental laws, rules, regulations and the designated facility license.

in the failure of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to

USE ONLY

BURIAL DATA

CONTAINER  
RATION  
all that apply to this load:  
1. 8m Soil (SNM) \_\_\_ 1.4F waste (SNM) \_\_\_ 2  
between upright containers (Gases) \_\_\_ 3  
soil (1 1/2 Chelates, Solidified Oils) \_\_\_ 4  
\_\_\_ 5 No requirement \_\_\_ 6

THE MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURES THIS MANIFEST

CATEGORY	HIGH R/W	CLASS A	CLASS B	CLASS C
DEPTH FEET				

Received

disposed

No.

material meets licensed limits.

material was disposed of in accordance with license.

INITIALS:

USECOLOGY INVOICE #	
USECOLOGY CUSTOMER #	
(Must agree with Agent named in Block 2)	
USECOLOGY INVOICE DATE:	
MO	DY
YR	
DISCREPANCY CODE(S):	

BATES # 9610070042-03  
CUSTOMER COPY

ANSTEC  
APERTURE  
CARD

Also Available on  
Aperture Card

GENERATOR NUMBER

DHR 99-000-7411

REV 5/8

## RADIOACTIVE WASTE SHIPMENT

US ECOLOGY

EXECUTIVE OFFICE

P.O. BOX 7246 • LOUISIANA

(1) GENERATOR NAME

SMITHKLINE BIOSCIENCE LAB.

ADDRESS

23430 COMMENCE BART ROAD

CITY

BENCHWOOD

STATE

OH.

ZIP

44122

CONTACT

PAUL JANIEKI

PHONE

216-464-5830

USER PERMIT #

1456

SHIPMENT #

4-20-88

(3) AGENT/BROKER

SEE P

BROKER'S US ECOLOGY #

ADDRESS

CITY

CONTACT

S. Black

BROKER SHIPMENT #

Robert Mal

Broker's Authorized Signature Acknowledging W

(2) BILL DISPOSAL CHARGES TO

Broker

NAME

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

## TOTAL FOR EACH CLASS

PROPER SHIPPING NAME & HAZARD CLASS  
(PER 49 CFR 172.101)

## ID NUMBER

# OF PACKAGES	WEIGHT (Pounds)		
		Radioactive Material, empty packages	UN2908
		Radioactive Material, fissile, n.o.s. -- Radioactive Material	UN2918
7	1050	Radioactive Material, low specific activity, n.o.s. -- Radioactive Material	UN2912
		Radioactive Material, n.o.s. -- Radioactive Material	UN2982
		Radioactive Material, limited quantity, n.o.s. -- Radioactive Material	UN2910
		Radioactive Material, special form, n.o.s. -- Radioactive Material	UN2974
		Radioactive Material, instruments and articles -- Radioactive Material	UN2911
		Thorium Nitrate -- Radioactive Material	UN2976
		Uranyl Acetate (RQ-5000/2270) -- Radioactive Material	NA9180
		Uranyl Nitrate, solid (RQ-5000/2270) -- Radioactive Material	UN2981

## TERMS AND CONDITIONS

- A. TITLE: Upon inspection and acceptance at the disposal site by US Ecology and all appropriate regulatory authorities, title to the Waste which conforms to Company's representations.
- B. WASTE PRODUCTS: Customer represents and warrants that data set forth in this Radioactive Waste Shipment & Disposal Manifest is true and correct in all respects and in accordance with the standards prescribed by the Department of Transportation or any other governmental agency having jurisdiction over such matters.
- C. INDEMNIFICATION: Customer agrees to indemnify US Ecology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from the waste.

## FOR US ECOLOGY'S USE

## LOAD EVALUATION

TYPE OF CONTAINER	CONTAINER VOLUME CU. FT.	# OF PKGS.	CU. FT. PER CONTAINER TYPE
DRUMS			
OVERPACK			
55	7.50		
30	4.01		
5	0.67		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
CASK LINERS			
OTHER			
OTHER			
SHIPMENT TOTALS			

## CHECK ALL THAT APPLY TO THIS LOAD. DESCRIBE INADEQUACIES IN COMMENT SECTION

- ☐ Manifest Waste Description Inadequate
- ☐ Contamination or Leakage Detected
- ☐ Unexpected Exposure Rates Detected
- ☐ No Violations Detected on this Load

- ☐ Bracing Inadequate
- ☐ Labels, Markings, etc. Inadequate
- ☐ Container Integrity Inadequate
- ☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN

7 X DMS

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED.

CONTAINER SEPARATE CODES 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000

Date

Date

Time

☐ This m

☐ This m

AUTHOR

# & DISPOSAL MANIFEST

Y, INC.

602) 426-7160

LE, KENTUCKY 40207

x #5

ZIP

PHONE

ER USER PERMIT #

6870

4-20-88

PAGE 1 OF

2

USE THIS NO. ON ALL  
CONTINUATION PAGES

96339

(4) CONSIGNED TO

☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☒ OTHER

CONTACT

ADDRESS

CITY

STATE

ZIP

PHONE

☐

P.O. BOX 578  
HWY 95, 12 m. So. of  
Beatty, NV 89003  
702-553-2203

(5) CARRIER

TELETYPE ISOTOPIES

SHIPPING DATE

4-20-88

CARRIER EPA # (if any)

ADDRESS

50 VAN BUREN AVE.

CITY

WESTWOOD

STATE

N.J. ZIP 07675

PHONE

201-669-7070

CASK TYPE

CASK SURFACE EXPOSURE RATE

mR/hr

(7)

## SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NU CLEAR MATERIAL (grams)			
			U-233	U-235	PLUTONIUM	TOTAL
52.5	7					
ACTIVITY						
ACTIVITY TOTALS:		TRITIUM	C-14	T-99	I-129	ALL ISOTOPIES
<input type="checkbox"/> Curies						
Millicuries <input checked="" type="checkbox"/>						.175
(10CFR20.311)						

ANSTEC  
APERTURE  
CARD

Also Available on  
Aperture Card

(8) THIS IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR PART 81 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

Karin Rosh

Authorized Signature

S. J. J. J.

Title

4-20-88

Date

INS

shall thereupon transfer from the Customer and be vested in US Ecology.

in all applicable governmental laws, rules, regulations and the designated facility license.

of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to meet

WLY

## BURIAL DATA

Apply to this card:  
1. 4F1 waste (SNM) ... 2.  
green upright containers (Gases) ... 3.  
Chemical agent 1% by volume ... 4.  
B. No requirement ... 5.

CLASSIFY MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURIED

WASTE	DEPTH (ft)	CLASS A	CLASS B	CLASS C
1				
2				
3				
4				
5				

ceived

posed

NO

that meets licensed limits

that was disposed of in accordance with license.

INITIALS

US ECOLOGY INVOICE #	
US ECOLOGY CUSTOMER #	
(Must agree with Agent named in Block 2)	
US ECOLOGY INVOICE DATE	MO DY YR
DISCREPANCY CODE(S)	

BATES #

CUSTOMER COPY

9610070042-04



GENERATOR NUMBER

OHA 9A-009-7411

GENERATOR NAME

Smith-Kline Beecham Lab

ADDRESS

23420 University Blvd. Rd

CITY

STATE

ZIP

CONTACT

PHONE

216-414-5330

SER PERMIT #

1456

SHIPMENT #

10-1-AT

ILL DISPOSAL CHARGES TO

Bunker

NAME

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

## RADIOACTIVE WASTE SHIPMENT &amp;

US ECOLOGY

EXECUTIVE OFFICE: (502)

P.O. BOX 7246

LOUISVILLE

(3) AGENT/BROKER

Per 150

BROKER'S US ECOLOGY #

ADDRESS

CITY

STATE

CONTACT

S. D. Smith

PH

BROKER SHIPMENT #

BROKER

Horton A. Martin  
Broker's Authorized Signature Acknowledging Waste R

TOTAL FOR EACH CLASS		PROPER SHIPPING NAME & HAZARD CLASS (PER 49 CFR 172.101)	ID NUMBER
# OF PACKAGES	WEIGHT (Pounds)		
		Radioactive Material, empty packages	UN2908
		Radioactive Material, fissile, n.o.s. — Radioactive Material	UN2918
7	1050	Radioactive Material, low specific activity, n.o.s. — Radioactive Material	UN2912
		Radioactive Material, n.o.s. — Radioactive Material	UN2982
		Radioactive Material, limited quantity, n.o.s. — Radioactive Material	UN2910
		Radioactive Material, special form, n.o.s. — Radioactive Material	UN2974
		Radioactive Material, instruments and articles — Radioactive Material	UN2911
		Thorium Nitrate — Radioactive Material	UN2976
		Uranyl Acetate (RQ-5000/2270) — Radioactive Material	NA9180
		Uranyl Nitrate, solid (RQ-5000/2270) — Radioactive Material	UN2981

## TERMS AND CONDITIONS

TITLE: Upon inspection and acceptance at the disposal site by US Ecology and all appropriate regulatory authorities, title to the Waste which conforms to Company's representations hereon shall pass to US Ecology.

WASTE PRODUCTS: Customer represents and warrants that data set forth in this Radioactive Waste Shipment & Disposal Manifest is true and correct in all respects and in accordance with applicable regulations.

WARRANTY: Customer agrees to indemnify US Ecology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from the failure of the waste to conform to the standards prescribed by the Department of Transportation or any other governmental agency having jurisdiction over such matters.

## FOR US ECOLOGY'S USE ONLY

## LOAD EVALUATION

TYPE OF CONTAINER	CONTAINER VOLUME CU. FT.	# OF PKGS	CU. FT. PER CONTAINER TYPE
DRUMS			
OVERPACK			
55	7.50		
30	1.19		
5	0.68		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
CASK LINERS			
OTHER			
SHIPMENT TOTALS			

CHECK ALL THAT APPLY TO THIS LOAD. DESCRIBE INADEQUACIES IN COMMENT SECTION.

☐ Manifest Waste Description Inadequate  
☐ Contamination or Leakage Detected  
☐ Unexpected Exposure Rates Detected  
☐ No Violations Detected on this Load

☐ Bracing Inadequate  
☐ Labels, Markings, etc. Inadequate  
☐ Container Integrity Inadequate  
☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN.

1 X DMS

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED

CONTAINER SEPARATION  
 Code as per  
 CODES: B  
 101: 00  
 101: 10  
 Other: J

WASTE CATEGORY  
 DEP  
 IN F

Date R  
 Date D  
 Trend  
☐ This mat  
☐ This mat  
 AUTHORIZED



# DISPOSAL MANIFEST

NC.

426-7160

KENTUCKY 40207

PAGE 1 OF 2

CONTINUATION PAGES

87156

(4) CONSIGNEE TO

☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☒ OTHER

CONTACT

ADDRESS

☐ P.O. BOX 576

HWY 95, 12 m. So. of  
Beatty, NV 89003  
702-553-2203

CITY

STATE

ZIP

PHONE

(5) CARRIER

CARRIER EPA # (if any)

ADDRESS

CITY

PHONE

CASK TYPE

CASK SURFACE EXPOSURE RATE

mR/hr

SHIPPING DATE

STATE

ZIP

Date

## SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NUCLEAR MATERIAL (grams)				TOTAL
			U-233	U-235	PLUTONIUM		
52.5	7						
ACTIVITY							
ACTIVITY TOTALS:		TRITIUM	C-14	Tc-99	I-129	ALL ISOTOPES	
<input type="checkbox"/> Curies							
<input checked="" type="checkbox"/> Millicuries							1026

(10CFR20.311)

THIS IS TO CERTIFY THAT THE HEREIN-CLASSIFIED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

Authorized Signature

Title

Date

shall thereupon transfer from the Customer and be vested in US Ecology.

applicable governmental laws, rules, regulations and the designated facility license.

the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to meet

## BURIAL DATA

BY THIS ROAD

(SAM) 1. 4F waste (SAM) 2.  
upright containers (Gases) 3.  
leaking agents 1% by volume 4.  
no requirements 5.

TO MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURIED

HIGH R/W	CLASS A	CLASS B	CLASS C

ved

used

meets licensed limits  
was disposed of in accordance with license.

INITIALS

US ECOLOGY INVOICE #	
US ECOLOGY CUSTOMER #	
(Must agree with Agent named in Block 2)	
US ECOLOGY INVOICE DATE	MO DY YR
DISCREPANCY CODE(S)	

BATES #

CUSTOMER COPY

9610070042-05

ANSTEC  
APERTURE  
CARD

Also Available on  
Aperture Card

GENERATOR NUMBER

OHR-99-000-7411

REV. 4/90

## RADIOACTIVE WASTE SHIPMENT &amp; DISPOSAL

USEcology Nuclear

US Ecology  
an American

EXECUTIVE OFFICE: (502)

P.O. BOX 7246 • LOUISVILLE, KY

1) GENERATOR NAME

ADDRESS

CITY

CONTACT

USER PERMIT #

STATE

ZIP

24 HOUR

EMERGENCY PHONE

SHIPMENT #

(3) AGENT/BROKER

BROKER'S US ECOLOGY #

ADDRESS

CITY

CONTACT

BROKER SHIPMENT #

2) BILL DISPOSAL CHARGES TO

NAME

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

Broker's Authorized Signature Acknowledging Waste Receipt

TOTAL FOR EACH CLASS		REPORTABLE QUANTITY NAME (if any)	PROPER SHIPPING NAME & HAZARD CLASS (PER 49 CFR 172.101)	ID NUMBER
# OF PACKAGES	WEIGHT (Pounds)			
			Radioactive Material, empty packages	UN2908
			Radioactive Material, fissile, n.o.s. — Radioactive Material	UN2918
			Radioactive Material, low specific activity, n.o.s. — Radioactive Material	UN2912
19	2850	—	Radioactive Material, n.o.s. — Radioactive Material	UN2982
			Radioactive Material, limited quantity, n.o.s. — Radioactive Material	UN2910
			Radioactive Material, special form, n.o.s. — Radioactive Material	UN2974
			Radioactive Material, instruments and articles — Radioactive Material	UN2911
			Uranyl Acetate (RQ-5000/2270) — Radioactive Material	NA9180

## TERMS AND CONDITIONS

A. TITLE: Upon inspection and acceptance at the disposal site by US Ecology and all appropriate regulatory authorities, title to the Waste which conforms to Compendium 101.1 is transferred to the receiving agency.

B. WASTE PRODUCTS: Customer represents and warrants that data set forth in this Radioactive Waste Shipment &amp; Disposal Manifest is true and correct in all respects.

C. INDEMNIFICATION: Customer agrees to indemnify US Ecology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from the waste which does not meet the standards prescribed by the Department of Transportation or any other governmental agency having jurisdiction over such matters.

FOR US ECOLOGY

TYPE OF CONTAINER	CONTAINER VOLUME CU FT	# OF PKGS	CU FT PER CONTAINER TYPE
DRUMS			
OVERPACK			
55	7.50		
30	4.01		
5	0.67		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
CASK LINERS			
OTHER			
OTHER			
SHIPMENT TOTALS			

## LOAD EVALUATION

CHECK ALL THAT APPLY TO THIS LOAD. DESCRIBE INADEQUACIES IN COMMENT SECTION

- ☐ Manifest Waste Description Inadequate  
☐ Contamination or Leakage Detected  
☐ Unexpected Exposure Rates Detected  
☐ No Violations Detected on this Load

- ☐ Bracing Inadequate  
☐ Labels, Markings, etc. Inadequate  
☐ Container Integrity Inadequate  
☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED

19 x DMS

# WASTE DISPOSAL MANIFEST

US Ecology company

6-7160

KENTUCKY 40207

PAGE 1 OF 2

(4) CONSIGNEE TO US Ecology, Inc.

☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☐ P.O. BOX 578  
HWY 95, 12 m. So. of  
Beatty, NV 89003  
702-553-2203

OTHER

CONTACT

ADDRESS

CITY

STATE

ZIP

PHONE

USE THIS NO. ON ALL

CONTINUATION PAGES

148351

(5) CARRIER

Teledyne Isotopes

SHIPPING DATE

3/4/92

CARRIER EPA (if any)

ADDRESS

CITY

STATE

ZIP

PHONE

CASK TYPE

CASK SURFACE EXPOSURE RATE mR/hr

USER PERMIT # 6870

Waste 3/4/92

(7) SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NUCLEAR MATERIAL (grams)				TOTAL
			U-233	U-235	PLUTONIUM		
142.5	19	—	—	—	—	—	—

ACTIVITY

ACTIVITY TOTALS

☐ Curies

☒ Millicuries

(10CFR20.311)

TRITIUM

C-14

Tc-99

I-129

ALL  
ISOTOPES

1380

THIS IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

NOTATIONS

Authorized Signature

Title

Date

3/4/92

representations herein shall thereupon transfer from the Customer and be vested in US Ecology.

and in accordance with all applicable governmental laws, rules, regulations and the designated facility license.

in the failure of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to

FOR USE ONLY

BURIAL DATA

CONTAINER  
VARIATION

(all that apply to this load)

5 5m Soil (SNM) 1 4ft waste (SNM) 2

between upright containers (Gases) 3

soil (1% Cheaters Solidified Oils) 4

or 8 No requirement 9

DATE MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURES  
IN THIS MANIFEST

WASTE CATEGORY	HIGH/IN	CLASS A	CLASS B	CLASS C
DEPTH IN FEET				

Received

Disposed

Sh No

Material meets licensed limits

Material was disposed of in accordance with license

AUTHORIZED INITIALS

US ECOLOGY INVOICE #

US ECOLOGY CUSTOMER #

(Must agree with Agent named in Block 2)

US ECOLOGY INVOICE DATE

MO DY YR

DISCREPANCY CODE(S)

9610070042-06  
BATES #

CUSTOMER COPY

ANSTEC  
APERTURE  
CARD

Also Available on  
Aperture Card







## DISPOSAL MANIFEST

Inc.  
Ecology company  
426-7160  
KENTUCKY 40207

PAGE 1 OF 2

(4) CONSIGNEE TO: US Ecology, Inc.

☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☐ P.O. BOX 578  
HWY 95, 12 m. - So. of  
Beatty, NV 89003  
702-553-2203

☒ OTHER

CONTACT

ADDRESS

CITY

STATE

ZIP

PHONE

(5) CARRIER

CARRIER EPA ID

ADDRESS

CITY

PHONE

SHIPPING DATE

STATE

ZIP

CASK TYPE

CASK SURFACE EXPOSURE RATE

mR/hr

STATE

ZIP

PHONE

CARRIER USER PERMIT

Date

USE THIS NO. ON ALL

CONTINUATION PAGES

148150

## (7) SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NUCLEAR MATERIAL (grams)			
			U-233	U-235	PLUTONIUM	TOTAL
99.5	13	—	—	—	—	—
ACTIVITY						
ACTIVITY TOTALS:		TRITIUM	C-14	Tc-99	I-129	ALL ISOTOPES
<input type="checkbox"/> Curies		—	—	—	—	1.039
<input checked="" type="checkbox"/> Millicuries		—	—	—	—	—
(10CFR20.311)						

THIS IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

Authorized Signature

Title

Date

## CONDITIONS

Buyer's representations herein shall thereupon transfer from the Customer and be vested in US Ecology.

Buyer's representations shall be in accordance with all applicable governmental laws, rules, regulations and the designated facility license.

Buyer's representations shall be from the failure of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to

## BUYER'S USE ONLY

## BURIAL DATA

CONTAINER  
SEPARATION  
(Code all that apply to this load)  
CODES Bin Box (SNM) 1 4ft waste (SNM) 2  
10ft: between upright containers (Cases) 3  
10ft: soil (1% Chelates, Solidified Oils) 4  
Other 5 No requirement 6

INDICATE MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURES  
FROM THIS MANIFEST

WASTE CATEGORY	HIGH/IN	CLASS A	CLASS B	CLASS C
DEPTH IN FEET				

Date Received

Date Disposed

Permit No.

This material meets licensed limits.

This material was disposed of in accordance with license.

AUTHORIZED INITIALS

US ECOLOGY INVOICE #

US ECOLOGY CUSTOMER #

(Must agree with Agent named in Block 2)

US ECOLOGY INVOICE DATE:

MO

DY

YR

DISCREPANCY CODE(S)

BATES #

CUSTOMER COPY

ANSTEC  
APERTURE  
CARDAlso Available on  
Aperture Card

9610070042-07

GENERATOR NUMBER

OHR-99-000-7411

REV. 4/90

## RADIOACTIVE WASTE SHIPMENT &amp; DISPOSAL

USEcology Nuclear

US Ecology  
an AmericanEXECUTIVE OFFICE: (502)  
P.O. BOX 7246 • LOUISVILLE, KY

1) GENERATOR NAME

ADDRESS

CITY

CONTACT

USER PERMIT #

STATE OH ZIP 44122

24 HOUR

EMERGENCY PHONE

SHIPMENT #

(3) AGENT/BROKER

BROKER'S US ECOLOGY #

ADDRESS

CITY

CONTACT

BROKER SHIPMENT #

Broker's Authorized Signature Acknowledging Waste Receipt

2) BILL DISPOSAL CHARGES TO

NAME

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

TOTAL FOR EACH CLASS

REPORTABLE  
QUANTITY NAME  
(if any)PROPER SHIPPING NAME & HAZARD CLASS  
(PER 49 CFR 172.101)

ID NUMBER

# OF PACKAGES

WEIGHT (Pounds)

Radioactive Material, empty packages

UN2908

Radioactive Material, fissile, n.o.s. — Radioactive Material

UN2918

Radioactive Material, low specific activity, n.o.s. — Radioactive Material

UN2912

Radioactive Material, n.o.s. — Radioactive Material

UN2982

Radioactive Material, limited quantity, n.o.s. — Radioactive Material

UN2910

Radioactive Material, special form, n.o.s. — Radioactive Material

UN2974

Radioactive Material, instruments and articles — Radioactive Material

UN2911

Uranyl Acetate (PO-5000/2270) — Radioactive Material

NA9180

TERMS AND CONDITIONS

A. TITLE: Upon inspection and acceptance at the disposal site by US Ecology and all appropriate regulatory authorities, title to the Waste which conforms to Company specifications shall be transferred to the customer.

WASTE PRODUCTS: Customer represents and warrants that data set forth in this Radioactive Waste Shipment &amp; Disposal Manifest is true and correct in all respects.

INDEMNIFICATION: Customer agrees to indemnify US Ecology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from the disposal of the waste at the disposal site. This obligation shall survive the termination or expiration of this agreement. The standards prescribed by the Department of Transportation or any other governmental agency having jurisdiction over such matters.

FOR US ECOLOGY

TYPE OF CONTAINER	CONTAINER VOLUME CU FT	# OF PKGS	CU FT PER CONTAINER TYPE
DRUMS			
OVERPACK			
55	7.50		
30	4.01		
5	0.67		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
CASK LINERS			
OTHER			
OTHER			
SHIPMENT TOTALS			

## LOAD EVALUATION

CHECK ALL THAT APPLY TO THIS LOAD. DESCRIBE INADEQUACIES IN COMMENT SECTION

☐ Manifest Waste Description Inadequate☐ Bracing Inadequate☐ Contamination or Leakage Detected☐ Labels, Markings, etc. Inadequate☐ Unexpected Exposure Rates Detected☐ Container Integrity Inadequate☐ No Violations Detected on this Load☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN

15 X DMS

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED

# DISPOSAL MANIFEST

Ecology company  
26-7160  
TUCKY 40207

USE THIS NO. ON ALL

CONTINUATION PAGES

148025

PAGE 1 OF 2

(4) CONSIGNED TO: US Ecology, Inc.

☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☐ P.O. BOX 578  
HWY 95, 12 m. S. of  
Beatty, NV 89003  
702-553-2203

CONTACT

ADDRESS

CITY

STATE

ZIP

PHONE

(5) CARRIER

SHIPPING DATE

CARRIER EPA #

ADDRESS

CITY

STATE

ZIP

PHONE

CASK TYPE

CASK SURFACE EXPOSURE RATE

mR/hr

SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NUCLEAR MATERIAL (grams)				TOTAL
			U-233	U-235	PLUTONIUM		
112.5	15						
ACTIVITY							
ACTIVITY TOTALS:		TRITIUM	C-14	Tc-99	I-129	ALL ISOTOPES	
<input type="checkbox"/> Curies							
<input checked="" type="checkbox"/> Millicuries						0045	

(10CFR20.311)

THIS IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

Authorized Signature

Title

Date

CONDITIONS

representations herein shall thereupon transfer from the Customer and be vested in US Ecology.

and in accordance with all applicable governmental laws, rules, regulations and the designated facility license.

in the failure of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to

US ECOLOGY INVOICE

BURIAL DATA

CONTAINER

VARIATION

(If all that apply to this load)

ES for Soil (SNM) 1-4 ft waste (SNM) 2

1. between upright containers (Gases) 3

2. soil (1% Chalcid, Sordidit Oils) 4

3. No requirement 5

STATE MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURES

IN THIS MANIFEST

WASTE CATEGORY HIGH/IN CLASS A CLASS B CLASS C

DEPTH IN FEET

Received

Disposed

ch No

This material meets licensed limits

this material was disposed of in accordance with license

HORIZEJ) INITIALS

US ECOLOGY INVOICE #

US ECOLOGY CUSTOMER #

(Must agree with Agent named in Block 2)

US ECOLOGY INVOICE DATE:

MO

DAY

YEAR

DISCREPANCY CODE(S):

BATES #

CUSTOMER COPY

ANSTEC  
APERTURE  
CARD

Also Available on  
Aperture Card

9610070042-08

GENERATOR NUMBER

OHR-99-000-7411

REV. 4/88

## RADIOACTIVE WASTE SHIPMENT &amp;

USEcology Nuclear

US Ecology  
an American

EXECUTIVE OFFICE: (502)

P.O. BOX 7246 • LOUISVILLE, KY

(1) GENERATOR NAME

Smith Kline Beecham Lab

ADDRESS

6180 HALLE DR.

CITY

VALLEY VIEW

STATE

OH.

ZIP

44125

CONTACT

Mr. Malachuk

PHONE

216-328-750

USER PERMIT #

1456

SHIPMENT #

10-7-90

(3) AGENT/BROKER

see box #3

BROKER'S USECOLOGY #

ADDRESS

CITY

CONTACT

S. Blaskie

BROKER SHIPMENT #

BROKER US

Broker's Authorized Signature Acknowledging Waste Receipt

(2) BILL DISPOSAL CHARGES TO

BROKER.

NAME

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

## TOTAL FOR EACH CLASS

REPORTABLE  
QUANTITY NAME  
(if any)PROPER SHIPPING NAME & HAZARD CLASS  
(PER 49 CFR 172.101)

ID NUMBER

# OF PACKAGES	WEIGHT (Pounds)			
			Radioactive Material, empty packages	UN2908
7	1050	—	Radioactive Material, fissile, n.o.s. — Radioactive Material	UN2918
			Radioactive Material, low specific activity, n.o.s. — Radioactive Material	UN2912
			Radioactive Material, n.o.s. — Radioactive Material	UN2982
			Radioactive Material, limited quantity, n.o.s. — Radioactive Material	UN2910
			Radioactive Material, special form, n.o.s. — Radioactive Material	UN2974
			Radioactive Material, instruments and articles — Radioactive Material	UN2911
			Uranyl Acetate (RQ-5000/2270) — Radioactive Material	NA9180

## TERMS AND CONDITIONS

- A. TITLE: Upon inspection and acceptance at the disposal site by US Ecology and all appropriate regulatory authorities, title to the Waste which conforms to Company's requirements shall pass to the customer.
- B. WASTE PRODUCTS: Customer represents and warrants that data set forth in this Radioactive Waste Shipment & Disposal Manifest is true and correct in all respects and that the waste is as described.
- DEMURNIFICATION: Customer agrees to indemnify US Ecology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from the waste not meeting the standards prescribed by the Department of Transportation or any other governmental agency having jurisdiction over such matters.

## FOR USECOLOGY

TYPE OF CONTAINER	CONTAINER VOLUME CU. FT.	# OF PKGS.	CU. FT. PER CONTAINER TYPE
DRUMS			
OVERPACK			
55	7.50		
30	4.01		
5	0.67		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
CASK LINERS			
OTHER			
OTHER			
SHIPMENT TOWERS			

## LOAD EVALUATION

CHECK ALL THAT APPLY TO THIS LOAD. DESCRIBE INADEQUACIES IN COMMENT SECTION

- ☐ Manifest Waste Description Inadequate  
☐ Contamination or Leakage Detected  
☐ Unexpected Exposure Rates Detected  
☐ No Violations Detected on this Load
- ☐ Bracing Inadequate  
☐ Labels, Markings, etc. Inadequate  
☐ Container Integrity Inadequate  
☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN

7X DMS

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED



# POSAL MANIFEST

ecology company  
26-7160  
TUCKY 40207

PAGE 1 OF 2  
(4) CONSIGNED TO: US Ecology, Inc.  
☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411  
☐ P.O. BOX 578  
HWY 95, 12 m. -- So. of  
Beatty, NV 89003  
702-553-2203

USE THIS NO. ON ALL CONTINUATION PAGES → 125833  
OTHER: See Box #5  
CONTACT: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_

(5) CARRIER: Klineham Isotopes SHIPPING DATE: 10-7-90  
CARRIER EPA # (if any): \_\_\_\_\_  
ADDRESS: 30 VAN BUREN AVE.  
CITY: WESTWOOD STATE: MT ZIP: 07615  
PHONE: 201-664-7070  
CASK TYPE: \_\_\_\_\_ CASK SURFACE EXPOSURE RATE: \_\_\_\_\_ mR/hr

(7) SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)						
VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NUCLEAR MATERIAL (grams)			
			U-235	U-238	PLUTONIUM	TOTAL
58.5	7	—	—	—	—	—
ACTIVITY						
ACTIVITY TOTALS:		TRITIUM	C-14	Tc-99	I-129	ALL ISOTOPES
<input type="checkbox"/> Curies <input checked="" type="checkbox"/> Millicuries (10CFR20.311)		—	—	—	—	1215

THIS IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: 10-9-90

entations herein shall thereupon transfer from the Customer and be vested in US Ecology.

accordance with all applicable governmental laws, rules, regulations and the designated facility license.

in the failure of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to

## S USE ONLY

### BURIAL DATA

AINER  
RATION  
all that apply to this load)  
2 Bin Soil (SNM) \_\_\_ 1.4 Ft waste (SNM) \_\_\_ 2  
between upright containers (Gases) \_\_\_ 3  
soil (1% Chelates, Solidified Oils) \_\_\_ 4  
\_\_\_ 5 No requirement \_\_\_ 6

MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURES THIS MANIFEST				
CATEGORY	High Act	CLASS A	CLASS B	CLASS C
DEPTH FEET				

Received: \_\_\_\_\_  
Disposed: \_\_\_\_\_  
th No. \_\_\_\_\_

as material meets licensed limits.  
as material was disposed of in accordance with license.

ORIZED INITIALS:

US ECOLOGY INVOICE # \_\_\_\_\_

US ECOLOGY CUSTOMER # \_\_\_\_\_  
(Must agree with Agent named in Block 2)

US ECOLOGY INVOICE DATE: \_\_\_\_\_  
MO DY YR

DISCREPANCY CODE(S): \_\_\_\_\_

BATES #

CUSTOMER COPY

GENERATOR NUMBER

OHA-99-000-7411

REV. 4/86

## RADIOACTIVE WASTE SHIPMENT &amp;

USEcology Nuclear

US Ecology  
an American

EXECUTIVE OFFICE: (502)

P.O. BOX 7246 • LOUISVILLE, KY

GENERATOR NAME

Smith Kline Beecham

ADDRESS

2342 Commerce Park Rd.

CITY

Bryn Mawr

STATE

PA

CONTACT

R. A. B. B.

PHONE

216-464-5831

USER PERMIT #

1756

SHIPMENT #

10/23/87

BILL DISPOSAL CHARGES TO

Baker

NAME

PURCHASE ORDER #

ADDRESS

CITY

STATE

ZIP

(3) AGENT/BROKER

see 10/45

BROKER'S USECOLOGY #

ADDRESS

CITY

STATE

CONTACT

S. B. B.

BROKER SHIPMENT #

BROKER USE

Broker's Authorized Signature Acknowledging Waste Receipt

TOTAL FOR EACH CLASS		REPORTABLE QUANTITY NAME (if any)	PROPER SHIPPING NAME & HAZARD CLASS (PER 49 CFR 172.101)	ID NUMBER
# OF PACKAGES	WEIGHT (Pounds)			
			Radioactive Material, empty packages	UN2908
11	1650	—	Radioactive Material, fissile, n.o.s. — Radioactive Material	UN2918
			Radioactive Material, low specific activity, n.o.s. — Radioactive Material	UN2912
			Radioactive Material, n.o.s. — Radioactive Material	UN2982
			Radioactive Material, limited quantity, n.o.s. — Radioactive Material	UN2910
			Radioactive Material, special form, n.o.s. — Radioactive Material	UN2974
			Radioactive Material, instruments and articles — Radioactive Material	UN2911
			Uranyl Acetate (RQ-5000/2270) — Radioactive Material	HA9180

## TERMS AND CONDITIONS

A. TITLE: Upon inspection and acceptance at the disposal site by US Ecology and all appropriate regulatory authorities, title to the Waste which conforms to Company's requirements shall pass to the customer.

B. WASTE PRODUCTS: Customer represents and warrants that data set forth in this Radioactive Waste Shipment &amp; Disposal Manifest is true and correct in all respects and that the waste is suitable for disposal at the site designated on the manifest.

C. INDEMNIFICATION: Customer agrees to indemnify US Ecology, its officers, employees and agents against all loss and liability whatsoever if such loss or liability results from the waste not meeting the standards prescribed by the Department of Transportation or any other governmental agency having jurisdiction over such matters.

## FOR USECOLOGY

TYPE OF CONTAINER	CONTAINER VOLUME CU. FT.	# OF PKGS.	CU. FT. PER CONTAINER TYPE
DRUMS			
OVERPACK			
55	7.50		
30	4.01		
5	0.87		
OTHER			
BOXES			
1st SIZE			
2nd SIZE			
3rd SIZE			
CASK LINERS			
OTHER			
OTHER			
SHIPMENT TOTALS			

## LOAD EVALUATION

CHECK ALL THAT APPLY TO THIS LOAD. DESCRIBE INADEQUACIES IN COMMENT SECTION

☐ Manifest Waste Description Inadequate☐ Contamination or Leakage Detected☐ Unexpected Exposure Rates Detected☐ No Violations Detected on this Load☐ Bracing Inadequate☐ Labels, Markings, etc. Inadequate☐ Container Integrity Inadequate☐ Other

DESCRIBE THE EXTENT OF ANY VIOLATION CHECKED ABOVE AND THE REMEDIAL ACTION TAKEN

11XDM

☐ CHECK HERE IF A SUPPLEMENTAL REPORT IS ATTACHED

# DISPOSAL MANIFEST

US Ecology company  
26-7160  
KENTUCKY 40207

PAGE 1 OF 3

(4) CONSIGNEE TO: US Ecology, Inc.

☐ P.O. BOX 638  
Hanford Reservation  
Richland, WA 99352  
509-377-2411

☐ P.O. BOX 578  
HWY 95, 12 m. -- So. of  
Beatty, NV 89003  
702-553-2203

☒ OTHER

CONTACT

ADDRESS

CITY

PHONE

USE THIS NO. ON ALL  
CONTINUATION PAGES

120704

(5) CARRIER: *Tele-Term: Logistics*

SHIPPING DATE

CARRIER EPA# (if any)

ADDRESS

CITY

PHONE

CASK TYPE

CASK SURFACE EXPOSURE RATE

mR/hr

(7) SHIPMENT TOTALS (DO NOT WRITE IN SHADED AREAS)

VOLUME (cu ft)	TOTAL # OF PACKAGES	SOURCE MATERIAL (kgs)	SPECIAL NUCLEAR MATERIAL (grams)			
			U-233	U-235	PLUTONIUM	TOTAL
86.5	11	—	—	—	—	—

ACTIVITY

ACTIVITY TOTALS	TRITIUM	C-14	Tc-99	I-129	ALL ISOTOPES
<input type="checkbox"/> Curies	—	—	—	—	1.100
<input checked="" type="checkbox"/> Millicuries	—	—	—	—	—

(10CFR20.311)

THIS IS TO CERTIFY THAT THE HEREIN-NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND ARE IN COMPLIANCE WITH ALL REQUIREMENTS APPLICABLE AT THE DESIGNATED DISPOSAL SITE, AND THAT THE MATERIALS ARE CLASSIFIED AND DESCRIBED IN ACCORDANCE WITH THE REQUIREMENTS OF 10CFR, PART 61 AND PART 20.311 OR EQUIVALENT STATE REGULATIONS.

Authorized Signature

Title

Date

CTIONS

representations herein shall thereupon transfer from the Customer and be vested in US Ecology.

in accordance with all applicable governmental laws, rules, regulations and the designated facility license.

in the failure of the Waste to conform in all material respects to the data supplied on the Radioactive Waste Shipment & Disposal Manifest or this shipment fails to

USE ONLY

BURIAL DATA

CONTAINER

URATION

(all that apply to this load)

5 6in Soil (SNM) 1 4ft waste (SNM) 2

between upright containers (Class) 3

soil (1% Chelates; Solidified Oils) 4

or 5 No requirement 6

DATE MINIMUM BURIAL DEPTH FOR EACH WASTE CATEGORY BURES

Y THIS MANIFEST

TE CATEGORY HIGH RAY CLASS A CLASS B CLASS C

DEPTH

IN FEET

Received

Disposed

th No

is material meets licensed limits.

is material was disposed of in accordance with license.

HORIZED INITIALS.

IS MANIFEST.

US ECOLOGY INVOICE #

US ECOLOGY CUSTOMER #

(Must agree with Agent named in Block 2)

US ECOLOGY INVOICE DATE

MO

DY

YR

DISCREPANCY CODE(S):

BATES #

CUSTOMER COPY









# TREATMENT SHIPPING PAPER

MANIFEST N° 66009

GENERATOR'S NAME SMITHKLINE BIO-SCIENCE LAB  
 ADDRESS 6180 HALLE DR  
VALLEY VIEW OH 441254614  
 PHONE SUE ROCCO  
216-328-7500

0005834

100

18-G-00421

GENERATOR'S REGISTRATION  
 CERTIFICATE NO. \_\_\_\_\_

Acct. No. 0005834

Description of Infectious Waste	No. of Containers	Container type by dimension	Total Weight
REGULATED MEDICAL WASTE 6.2, NA9275, PGII	13	Tub- 27" high x 20" diameter	
		Tub- 23" high x 20" diameter	
		Tub- 17-3/4" high x 15-1/2" dia.	
		Large Box- 21" x 21" x 32"	
		Medium Box- 24" x 17" x 22"	
EMERGENCY TELEPHONE NUMBER 216-393-0385		Small Box- 12" x 17" x 22"	

Generator's Certification: This is to certify that the above named materials are properly classified, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and Rule 3745-27-34 of the Ohio Administrative Code.

GERALD A. JUNK  
 Print/Type Name

Gerald A. Junk  
 Signature

7-12-93  
 Date

## TRANSPORTER 1

BFI Medical Waste Systems  
 1901 Pine Avenue S.E. Warren, Ohio 44483  
 216-393-0385

Registration Certificate No. 78-T-0048

Vehicle Decal # \_\_\_\_\_

Acknowledgement of Receipt of Materials

Print/Type Name Jim Ackerman Date 7/12/93

Signature [Signature]

## TRANSPORTER 2

Phone \_\_\_\_\_

Registration Certificate No. \_\_\_\_\_

Vehicle Decal # \_\_\_\_\_

Acknowledgement of Receipt of Materials

Print/Type Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

## GENERATOR DESIGNATED INFECTIOUS WASTE TREATMENT FACILITY

BFI Medical Waste Systems  
 1901 Pine Ave. S.E.  
 Warren, Ohio 44483  
 Phone 216-393-0385

## ALTERNATE FACILITY:

HMI

540 Rivergate Road

Memphis, TN. 38109

Phone 901-948-1355

## INFECTIOUS WASTE TREATMENT FACILITY

### ACKNOWLEDGEMENT OF RECEIPT OF MATERIALS

BFI Medical Waste Systems 216-393-0385  
 1901 Pine Avenue S.E. Warren, Ohio 44483

Signature Sabrina McKim Date 7/12/93

Discrepancy Indication \_\_\_\_\_

Treatment Certification: This is to certify that the infectious wastes described above were treated in accordance with paragraph (A) of rule 3745-27-32 of the Ohio Administrative Code.

SABRINA MCKIM

Print/Type Name

Sabrina McKim  
 Signature

7-13-93  
 Date

WHITE- GENERATOR • YELLOW- TREATMENT FACILITY • PINK- TRANSPORTER • GOLD- GENERATOR

Revised 9-92

Cont'n'r No.	Type Waste	Weight	Cont'n'r No.	Type Waste	Weight
13	INFECT				
13	GRAND TOTALS	555.1			

15.10 p.u. 174.80

MANIFEST N° 66300

0005834

18-G-00421

## GENERATOR'S REGISTRATION

Acct. No. 000580

REGULATED MEDICAL WASTE 6.2, NA9275, PGII

**Generator's Certification:** This is to certify that the above named materials are properly classified, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and Rule 3745-27-34 of the Ohio Administrative Code.

ROB'T. S. WAY  
Print/Type Name

Signature

7-14-93  
Date

### Acknowledgement of Receipt of Materials

Print/Type Name Tim H. Thompson Date 2/14/03

Signature Jim Chernia

Phone \_\_\_\_\_  
Registration Certificate No. \_\_\_\_\_  
Vehicle Decal # \_\_\_\_\_  
Acknowledgement of Receipt of Materials  
Print/Type Name \_\_\_\_\_ Date \_\_\_\_\_  
Signature \_\_\_\_\_

BFI Medical Waste Systems  
1901 Pine Ave. S.E.  
Warren, Ohio 44483  
Phone 216-393-0385

## HMI

540 Rivergate Road

Memphis, TN. 38109

Phone 901-948-1355

BFI Medical Waste Systems 216-393-0385  
1901 Pine Avenue S.E. Warren, Ohio 44483

Signature Mary Ann Carole Date 7-14-93

Discrepancy Indication

**Treatment Certification:** This is to certify that the infectious wastes described above were treated in accordance with paragraph (A) of rule 3745-27-32 of the Ohio Administrative Code.

MARY ANN CARLILE

Print/Type Name

Mary Anna Carlile  
Signature

7-14-93

Date \_\_\_\_\_

WHITE- GENERATOR • YELLOW- TREATMENT FACILITY • PINK- TRANSPORTER • GOLD- GENERATOR

Revised 9-92

MANIFEST N° 65954

18-G-00421

Acct. No. 00058

7-16-93  
Date

7-17-93  
Date

Date \_\_\_\_\_

Revised 9-92



# TREATMENT SHIPPING PAPER

MANIFEST N° 62005

GENERATOR'S SMITHKLINE BIO SCIENCE LAB  
 NAME 6180 HALLE DR  
 ADDRESS VALLEY VIEW OH 441254614  
 PHONE SUE ROCCO  
 216-328-7500

0005834

18-G-00421

Acct. No. 0005834 GENERATOR'S REGISTRATION  
 CERTIFICATE NO.

Description of Infectious Waste	No. of Containers	Container type by dimension	Total Weight
REGULATED MEDICAL WASTE 6.2, NA9275, PGII	15	Tub- 27" high x 20" diameter	
		Tub- 23" high x 20" diameter	
		Tub- 17-3/4" high x 15-1/2" dia.	
		Large Box- 21" x 21" x 32"	
		Medium Box- 24" x 17" x 22"	
EMERGENCY TELEPHONE NUMBER 216-393-0385		Small Box- 12" x 17" x 22"	

Generator's Certification: This is to certify that the above named materials are properly classified, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and Rule 3745-27-34 of the Ohio Administrative Code.

GERALD A. JUNG  
 Print/Type Name

Gerald A. Jung  
 Signature

7-23-93  
 Date

## TRANSPORTER 1

BFI Medical Waste Systems  
 1901 Pine Avenue S.E. Warren, Ohio 44483  
 216-393-0385

Registration Certificate No. 78-T-0048

Vehicle Decal # 00625

Acknowledgement of Receipt of Materials

Print/Type Name Jim Ackerman Date 7/23/93

Signature Jim Ackerman

## TRANSPORTER 2

Phone \_\_\_\_\_

Registration Certificate No. \_\_\_\_\_

Vehicle Decal # \_\_\_\_\_

Acknowledgement of Receipt of Materials

Print/Type Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

## GENERATOR DESIGNATED INFECTIOUS WASTE TREATMENT FACILITY

BFI Medical Waste Systems  
 1901 Pine Ave. S.E.  
 Warren, Ohio 44483  
 Phone 216- 393-0385

## ALTERNATE FACILITY:

HMI

540 Rivergate Road

Memphis, TN. 38109

Phone 901-948-1355

## INFECTIOUS WASTE TREATMENT FACILITY

### ACKNOWLEDGEMENT OF RECEIPT OF MATERIALS

BFI Medical Waste Systems 216-393-0385  
 1901 Pine Avenue S.E. Warren, Ohio 44483

Signature Chl Ed Date 7/23/93

Cont'n'r No.	Type Waste	Weight	Cont'n'r No.	Type Waste	Weight
15	Tub- 27"				
15	GRAND TOTALS	702.6			

Discrepancy Indication \_\_\_\_\_

Treatment Certification: This is to certify that the infectious wastes described above were treated in accordance with paragraph (A) of rule 3745-27-32 of the Ohio Administrative Code.

CHARLES EDELMAN

Print/Type Name

Charles Edelman

Signature

7-24-93

Date

WHITE- GENERATOR • YELLOW- TREATMENT FACILITY • PINK- TRANSPORTER • GOLD- GENERATOR

Revised 9-92

MANIFEST N° 62719

0005834

18-G-00421

Acct. No. 000585

Description of Infect'ous Waste	No. of Containers	Container type by dimension	Total Weight
REGULATED MEDICAL WASTE 6.2, NA9275, PGII		Tub- 27" high x 20" diameter	
		Tub- 23" high x 20" diameter	
		Tub- 17-3/4" high x 15-1/2" dia.	
	16	Large Box- 21" x 21" x 32"	
		Medium Box- 24" x 17" x 22"	
	Small Box- 12" x 17" x 22"		
EMERGENCY TELEPHONE NUMBER			
216-393-0385			

Rob't. S. Way  
Print/Type Name

properly classified, packed,  
Department of Transportation  
*[Signature]*  
Signature

72193  
Date

Print/Type Name Jim Akkerman Date 2/21/13

Signature Jim C. Kenna

## Phone

Registration Certificate No.

Vehicle Decal #

### Acknowledgement of Receipt of Materials

Print/Type Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

GENERATOR DESIGNATED INFECTIOUS WASTE  
TREATMENT FACILITY

BFI Medical Waste Systems

1901 Pine Ave. S.E.

Warren, Ohio 44483

ALTERNATE FACILITY:

HMI

540 Rivergate Road

Memphis, TN, 38109

Phone 901-948-1355

## INFECTIOUS WASTE TREATMENT FACILITY

## ACKNOWLEDGEMENT OF RECEIPT OF MATERIALS

BFI Medical Waste Systems 216-393-0385

1901 Pine Avenue S.E. Warren, Ohio 44483

Signature [Signature] Date 7-21-75

[illegible]

Discrepancy Indication

15.02 p.m. 236.34

**Treatment Certification:** This is to certify that the infectious wastes described above were treated in accordance with paragraph (A) of rule 3745-27-32 of the Ohio Administrative Code.

DAVE SHIPLEY

100

7-22-93

Print/Type Name

Signature \_\_\_\_\_

Date \_\_\_\_\_

WHITE- GENERATOR • YELLOW- TREATMENT FACILITY • PINK- TRANSPORTER • GOLD- GENERATOR

Revised 9-92



## CONVERSATION RECORD

TIME

DATE

4:15 pm

8/8/96

☐ VISIT☐ CONFERENCE☒ TELEPHONE☒ INCOMING☐ OUTGOING

NAME OF PERSON(S) CONTACTED OR IN CONTACT

ORGANIZATION (OFFICE, DEPT. ETC.)

TELEPHONE NO.

Brian Shrimpton

SmithKline Beecham

216-328-7500  
ext. 7538

SUBJECT

C/N 301378

L/N 34-25988-01

Additional Information  
Requested:

SUMMARY

Confirm whether each item applies or not.

When a licensee terminates licensed activities or licensed activities are transferred to another licensee, we require that certain records be transferred to the NRC or to a successor licensee to ensure their long-term availability. Please transfer the following records, as were applicable to your program, that pertain to:

- the decommissioning of your facility;
- radiation doses to the public; and
- waste disposal by release to sewers, incineration, radioactive material spills, and on-site burials.

Records may be transferred to the USNRC Region III, 801 Warrenville Road, Lisle, Illinois 60532-4351, or to the new licensee if licensed activities will continue at the same location under another NRC license.

No transfers or changes of ownership or license terminations will be authorized unless all records considered important to the safe and effective decommissioning of the facility contained in 10 CFR 30.35(g), 40.36(f), 70.25(g), and 72.30(d) and all records concerning public dose and waste disposal have been transferred to the person continuing the licensed activity, or to the NRC for license terminations.

ACTION REQUIRED

① Identity of instruments  
(Countertop GM)efficiency +  
calibration dates

② Diagram of facility w/ surveyed areas, wiped areas keyed to it.

(Per 1/23/96 inspection, no H-3 was ever used or possessed here).

15 days to respond (+ or -) a week - Brian will be on vacation

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

Colleen Casey

8/8/96

ACTION TAKEN

OPTIONAL FORM 99 (7-90)

## FAX TRANSMITTAL

# of pages: 1

SIGNATURE

BRIAN SHRIMPTON

From

COLLEEN CASEY

SMITHKLINE BEECHAM LABS

Phone #

630-829-9841

216-328-7539

Fax #

630-575-1078/1259

NSN 7540-01-317-7368

5099-101

GENERAL SERVICES ADMINISTRATION